SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 1202 / 2750 (check only one) X
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Full Name (Last, First, Middle Initial) MR. J. MARK JONES Mailing Address 150 ASPEN TRAIL City COLUMBIA FEC ID number of contributing federal political committee. Name of Employer N.M.R.S. Receipt For: Primary General Other (specify)	State Zip Code SC 29206-4977 C Occupation ATTORNEY Aggregate Year-to-Date 1000.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR. JERRAL W. JONES, SR. Mailing Address P.O. BOX 260317 City PLANO FEC ID number of contributing federal political committee. Name of Employer DALLAS COWBOYS Receipt For: Primary General Other (specify)	State Zip Code TX 75026-0317 C Occupation OWNER Aggregate Year-to-Date 28500.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) DR. MARVIN MICHAEL JONES Mailing Address 8 TIN PEDDLER DRIV City MILLSTONE TOWNSHIP FEC ID number of contributing federal political committee. Name of Employer CONTRA STATE HEALTHCARE Receipt For: Primary General Other (specify)	State Zip Code NJ 08510-8734 C Occupation CHAIRMAN Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		32000.00